

PATENT NUMBER

JC973 U.S. PTO
09/863181
05/23/01

ISSUE CLASSIFICATION	
Class	Subclass

O.I.P.E.

PATENT DATE

O.I.P.E.
SCANNED *Feb 1* Q.A. *ALL!*

APPLICATION NO. 09/863181	CONT/PRIOR	CLASS 083	SUBCLASS 13	ART UNIT 3724	EXAMINER Peterson
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TITLE	APPLICANTS
1. Chief Executive Officer	1. Mr. [Name]
2. President	2. Mr. [Name]
3. Vice President	3. Mr. [Name]
4. Director	4. Mr. [Name]
5. Manager	5. Mr. [Name]
6. Supervisor	6. Mr. [Name]
7. Clerk	7. Mr. [Name]
8. Assistant	8. Mr. [Name]
9. Secretary	9. Mr. [Name]
10. Receptionist	10. Mr. [Name]
11. Janitor	11. Mr. [Name]
12. Security Guard	12. Mr. [Name]
13. Driver	13. Mr. [Name]
14. Cook	14. Mr. [Name]
15. Nurse	15. Mr. [Name]
16. Doctor	16. Mr. [Name]
17. Lawyer	17. Mr. [Name]
18. Engineer	18. Mr. [Name]
19. Scientist	19. Mr. [Name]
20. Teacher	20. Mr. [Name]
21. Student	21. Mr. [Name]
22. Researcher	22. Mr. [Name]
23. Analyst	23. Mr. [Name]
24. Programmer	24. Mr. [Name]
25. Designer	25. Mr. [Name]
26. Writer	26. Mr. [Name]
27. Editor	27. Mr. [Name]
28. Publisher	28. Mr. [Name]
29. Distributor	29. Mr. [Name]
30. Retailer	30. Mr. [Name]
31. Wholesaler	31. Mr. [Name]
32. Importer	32. Mr. [Name]
33. Exporter	33. Mr. [Name]
34. Manufacturer	34. Mr. [Name]
35. Supplier	35. Mr. [Name]
36. Contractor	36. Mr. [Name]
37. Consultant	37. Mr. [Name]
38. Advisor	38. Mr. [Name]
39. Specialist	39. Mr. [Name]
40. Expert	40. Mr. [Name]
41. Scholar	41. Mr. [Name]
42. Professor	42. Mr. [Name]
43. Lecturer	43. Mr. [Name]
44. Instructor	44. Mr. [Name]
45. Tutor	45. Mr. [Name]
46. Mentor	46. Mr. [Name]
47. Coach	47. Mr. [Name]
48. Trainer	48. Mr. [Name]
49. Teacher	49. Mr. [Name]
50. Student	50. Mr. [Name]

William Cox

Rotary die module

PTO-2040
12/99

ORIGINAL

CROSS REFERENCE(S)

CLASS	SUBCLASS	CLASS	SUBCLASS (ONE SUBCLASS PER BLOCK)					
INTERNATIONAL CLASSIFICATION								

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	Sheets Drwg.	Figs. Drwg.	Print Fig.	Total Claims	Print Claim for O.G.
<input type="checkbox"/> The term of this patent subsequent to _____ (date) has been disclaimed. <input type="checkbox"/> The term of this patent shall not extend beyond the expiration date of U.S Patent. No. _____ _____ _____	_____ (Assistant Examiner) (Date)			NOTICE OF ALLOWANCE MAILED	
	_____ (Primary Examiner) (Date)			ISSUE FEE	
				Amount Due	Date Paid
<input type="checkbox"/> The terminal ____months of this patent have been disclaimed.	_____ (Legal Instruments Examiner) (Date)			ISSUE BATCH NUMBER	
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